

UNITED STATES PATENT & TRADEMARK OFFICE
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REQUEST FOR PATENT FEE REFUND					
1 Date of Request: <u>7/12/05</u>		2 Serial/Patent # <u>10/522 066</u>			
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
X	Filing			\$	
	Amendment			\$	
	Extension of Time			\$	
	Notice of Appeal/Appeal			\$	
	Petition			\$	
	Issue			\$	
	Cert of Correction/Terminal Disc.			\$	
	Maintenance			\$	
	Assignment			\$	
	Other			\$	
<div style="border: 1px solid black; padding: 10px; display: inline-block; text-align: center;"> <i>Done</i> </div>		7 TOTAL AMOUNT OF REFUND		\$	
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
X	Overpayment	Credit Deposit A/C #:			
	Duplicate Payment	<div style="display: flex; align-items: center;"> 9 <div style="border: 1px solid black; padding: 2px 5px;"> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> </div> </div> </div>			
	No Fee Due (Explanation):				
<div style="font-size: 1.2em; margin: 10px 0;">Refunded to</div> <div style="font-size: 1.2em; margin: 0 0;">credit card</div>					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: <u>Darrell Cottman</u>			TITLE: <u>Paralegal</u>		
SIGNATURE: <u><i>Darrell Cottman</i></u>			PHONE: <u>703-306-9140 x263</u>		
OFFICE: _____					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****					
APPROVED: _____			DATE: _____		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

U.S. Appl. No.

JP 2003/009407

Internatic

10/522066

Application filed by : ☒ 30 months

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Published : C

INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE :

- | | |
|---|---|
| <input type="checkbox"/> International Application | <input type="checkbox"/> Request form PCT/RO/101 |
| <input type="checkbox"/> Article 19 Amendments | <input checked="" type="checkbox"/> PCT/ISA/210 - Search Report |
| <input type="checkbox"/> PCT/IB/331 | <input type="checkbox"/> Search Report References |
| <input checked="" type="checkbox"/> PCT/PEA/409 IPER (PCT/PEA/416 on front) | <input type="checkbox"/> PCT/IB/306 - Notification of a Change |
| <input type="checkbox"/> Annexes to 409 (Article 34 Amendment) | <input type="checkbox"/> Other : _____ |
| <input checked="" type="checkbox"/> Priority Document (s) No. 2 | |

RECEIPTS FROM THE APPLICANT:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Basic National Fee (or authorization to charge) | <input checked="" type="checkbox"/> Preliminary Amendment(s) Filed on :
1. _____ 2. _____ 3. _____ |
| <input checked="" type="checkbox"/> Description | <input checked="" type="checkbox"/> Information Disclosure Statement(s) Filed on :
1. _____ 2. _____ 3. _____ |
| <input checked="" type="checkbox"/> Claims | <input checked="" type="checkbox"/> Assignment Document (forwarded to Assignment Branch) |
| <input checked="" type="checkbox"/> Drawing Figure(s) - (# of dwgs. 24) | <input type="checkbox"/> Assignee PG Publication Notice |
| <input type="checkbox"/> Translation of Article 19 Amendments
<input type="checkbox"/> entered <input type="checkbox"/> not entered : | <input type="checkbox"/> Substitute Specification Filed on :
1. _____ 2. _____ |
| <input type="checkbox"/> Translation of Annexes to 409
<input type="checkbox"/> entered <input type="checkbox"/> not entered :
<input type="checkbox"/> not a page for page substitution
<input type="checkbox"/> replaced by Article 34 Amendment | <input type="checkbox"/> Verified Small Status Statement (executed) |
| <input type="checkbox"/> Application Data Sheet | <input checked="" type="checkbox"/> Oath/ Declaration (executed)
<input type="checkbox"/> surcharge was paid at the time of filing |
| <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Change of Address | <input type="checkbox"/> DNA Diskette <input type="checkbox"/> Sequence Listing |
| | <input type="checkbox"/> Other : 1. _____ |
| | <input type="checkbox"/> Other : 1. _____ |

NOTES : ☐ I.A. used as Specification ☐ Other :

35 U.S.C. 371 - Receipt of Request

Date Acceptable Oath/ Declaration Received

Date of Completion of requirements under 35 U.S.C. 371(c)(1), (c)(2) and (c)(4)

Date of Completion of ALL requirements under 35 U.S.C. 371

Date of Completion of DO/EO 903 - Notification of Acceptance

Date of Completion of DO/EO 905 - Notification of Missing Requirements

Date of Completion of DO/EO 916 - Notification of Defective Response

Date of Completion of DO/EO 909 - Notification of Abandonment

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